

OLAYANJU KABIRAT OLAITAN
EPIDEMIOLOGY AND DISEASES CONTROL
CHO 300L

1. **Discuss communicable diseases under the following headings:**

Definition

Causative agents

Modes of transmission

Methods of prevention and control

Communicable diseases, also known as infectious diseases, are illnesses that result from the infection, presence, and growth of pathogenic biological agents in an individual host. These diseases can be transmitted directly or indirectly from one person, animal, or object to another

Communicable diseases pose significant public health challenges because they can spread quickly within populations, especially in areas with poor sanitation, inadequate healthcare, and low vaccination coverage. Examples include malaria, cholera, tuberculosis, influenza, measles, and HIV/AIDS.

1. Causative Agents

Communicable diseases are caused by different types of microorganisms or pathogens. Each group of pathogen has specific characteristics and causes particular types of diseases:

Bacteria:

These are single-celled microorganisms that can survive in various environments. Some bacteria are beneficial, but disease-causing bacteria (pathogenic bacteria) can lead to infections such as tuberculosis, typhoid fever, cholera, and pneumonia.

2. Viruses:

Viruses are much smaller than bacteria and can only multiply inside living cells of the host. They are responsible for a wide range of diseases, such as HIV/AIDS, influenza, measles, COVID-19, and hepatitis.

3. Fungi:

Fungi are organisms that thrive in warm, moist environments. They can infect the skin, nails, and respiratory tract. Common fungal diseases include ringworm, athlete's foot, and candidiasis.

4. Protozoa:

Protozoa are single-celled organisms often transmitted through contaminated food or insect bites. They are responsible for diseases such as malaria, amoebic dysentery, and sleeping sickness.

Example: Plasmodium falciparum causes malaria.

5. Helminths (Parasitic Worms):

These are large, multicellular organisms that live inside the body, often in the intestines. Examples

include tapeworms, roundworms, and hookworms, which cause malnutrition and anemia.

6. Rickettsiae:

These are organisms that have characteristics of both bacteria and viruses. They are transmitted through bites of infected arthropods such as fleas, ticks, or lice.

Example: *Rickettsia prowazekii* causes typhus fever.

.Modes of Transmission:

1. Direct Transmission:

Occurs when pathogens are transferred directly from one person to another through physical contact such as touching, kissing, sexual contact, or droplets from coughing and sneezing.

Examples: HIV/AIDS, common cold, influenza.

2. Indirect Transmission:

Involves contact with contaminated surfaces, objects, or materials (fomites) that carry infectious agents.

Examples: COVID-19 (through contaminated surfaces), hepatitis A (through contaminated utensils).

3. Airborne Transmission:

Some pathogens can remain suspended in the air and are transmitted when a healthy person inhales them.

Examples: Tuberculosis, measles, influenza.

4. Vector-borne Transmission:

Insects and animals act as carriers (vectors) of disease-causing organisms. For example, mosquitoes transmit malaria and dengue, while tsetse flies transmit sleeping sickness.

5. Water-borne and Food-borne Transmission:

Diseases can spread through consumption of contaminated food or water.

Examples: Cholera, typhoid, and hepatitis A.

6. Vertical Transmission:

This occurs when infections are passed from mother to child during pregnancy, childbirth, or breastfeeding.

Examples: HIV, syphilis, hepatitis B.

.Methods of Prevention and Control

1. Immunization:

Vaccination helps protect individuals and communities from specific infectious diseases such as measles, polio, hepatitis B, and influenza. Immunization programs are one of the most effective methods of disease prevention.

2. Personal Hygiene:

Maintaining good hygiene practices such as regular handwashing with soap, bathing daily, brushing teeth, and keeping nails trimmed reduces the risk of infection.

3. Environmental Sanitation:

Proper waste disposal, clean water supply, safe sewage systems, and vector control (e.g., removing

stagnant water to prevent mosquito breeding) are vital for disease control.

4. Health Education:

Educating the public about disease prevention, proper nutrition, sanitation, and the importance of vaccination encourages healthy behavior and early treatment-seeking.

5. Isolation and Quarantine:

Infected individuals should be isolated to prevent spreading the disease to others. Quarantine helps contain diseases during outbreaks.

6. Use of Protective Measures:

Wearing masks, using gloves, insect repellents, bed nets, and practicing safe sex reduce exposure to infectious agents.

7. Early Detection and Prompt Treatment:

Regular medical checkups and early treatment help prevent complications and limit the spread of disease. For example, treating malaria early prevents transmission by mosquitoes.

8. Government and Community Action:

Governments and health agencies must ensure strong disease surveillance systems, promote vaccination drives, and provide access to healthcare facilities. Community involvement strengthens disease prevention efforts.

2. Explain the term endemic, epidemics and pandemic,given examples

1. Endemic:

An endemic disease is one that is constantly present in a particular geographical area or population group. It occurs at a predictable and relatively steady rate over time. In other words, it is a disease that is always present in a community, though usually at low or expected levels.

Endemic diseases are maintained within a population without the need for external introduction of the infection. The number of cases remains fairly stable over time, although occasional increases or decreases can occur.

Examples:

- Malaria is endemic in many tropical and subtropical regions of Africa, Asia, and South America.
- Chickenpox is endemic in many parts of the world where vaccination coverage is low.
- Common cold is considered endemic worldwide because it occurs regularly in all populations.

2. Epidemic:

An epidemic occurs when the number of cases of a particular disease in a community or region increases suddenly and significantly above the normal or expected level. It indicates an outbreak that affects many people in a short period.

Epidemics usually arise when a new infectious agent is introduced into a population, when existing agents change (for example, mutation of a virus), or when environmental and social conditions favor disease transmission. Epidemics can be localized (affecting a small area) or widespread within a country or region.

Examples:

- The Ebola outbreak in West Africa between 2014 and 2016 was an epidemic that affected several countries.
- An outbreak of cholera in a city following heavy rainfall and contamination of water sources is also considered an epidemic.
- A measles outbreak in an unvaccinated community can lead to an epidemic.

3. Pandemic:

A pandemic is an epidemic that has spread over multiple countries or continents, usually affecting a large number of people across the world. It represents a global outbreak of a new or highly contagious disease.

Pandemics occur when a new infectious disease emerges that spreads easily from person to person and most people have little or no immunity to it. Pandemics can cause widespread illness, death, and social or economic disruption.

Examples:

- The COVID-19 pandemic caused by the SARS-CoV-2 virus began in Wuhan, China, in 2019 and spread globally, affecting millions of people.
- The Influenza pandemic of 1918–1919 (also known as the Spanish flu) killed millions worldwide.
- The H1N1 influenza pandemic in 2009 spread to more than 200 countries.
- The ongoing HIV/AIDS pandemic, which began in the early 1980s, continues to affect populations worldwide.

3. Define and distinguish between incidence and prevalence. Explain their importance in epidemiology with examples

1. Incidence:

Incidence refers to the number of new cases of a particular disease that occur in a specified population during a defined period of time. It measures the rate at which new illnesses develop in a population at risk.

Formula:

Incidence rate = $\frac{\text{Number of new cases during a specific period}}{\text{Population at risk during that period}} \times 1,000 \text{ (or } 100,000 \text{)}$

Example:

If 50 new cases of malaria occur in a village of 1,000 people during one year, the incidence rate is:
 $50/1000 \times 1000 = 50$ new cases per 1,000 people per year.

2. Prevalence:

Prevalence refers to the total number of existing cases (both new and old) of a particular disease in a specified population at a given point in time or over a specific period. It measures how

widespread a disease is within a population.

Formula:

Prevalence rate = $\frac{\text{Total number of existing cases (new + old)}}{\text{Total population}} \times 1,000$ (or 100,000)

Example:

If in the same village of 1,000 people, there are 100 people currently living with malaria (both new and old cases), the prevalence is:

$\frac{100}{1000} \times 1000 = 100$ cases per 1,000 people.

2. Distinction Between Incidence and Prevalence are:

- Incidence and prevalence are related but measure different aspects of disease occurrence.

- Incidence focuses only on new cases that appear over a certain period, while prevalence includes all existing cases both new and old at a particular point in time.

- Incidence tells us about the risk of developing a disease, while prevalence tells us about the burden of the disease in a population.

- Incidence is used mainly to study the causes of disease and the effectiveness of prevention programs because it shows how fast new cases are occurring. In contrast, prevalence is useful for planning health services and determining how many people currently need care or treatment.

- Incidence is not affected by how long a disease lasts, since it only counts new cases, whereas prevalence is influenced by the duration of the disease — chronic diseases that last a long time (like diabetes or HIV/AIDS) have higher prevalence, even if their incidence is low.

Importance of Incidence and Prevalence in Epidemiology

Both incidence and prevalence are fundamental measures in epidemiology the study of disease distribution and determinants in populations. They are used for disease surveillance, research, and health planning.

a) Importance of Incidence:

1. Measures the rate of disease occurrence: Helps identify how fast a disease is spreading in a population.
2. Determines risk factors: Used to study causes of diseases and identify high-risk groups.
3. Evaluates the effectiveness of preventive programs: For example, a drop in incidence after vaccination indicates success of an immunization program.
4. Helps in outbreak detection: A sudden rise in incidence signals an epidemic or outbreak.

Example:

A rise in the incidence of dengue fever in a city during the rainy season may indicate increased mosquito breeding and inadequate control measures.

b) Importance of Prevalence:

1. Measures disease burden: Shows how widespread a disease is at a given time, useful for planning healthcare services.
2. Assists in resource allocation: Helps determine the need for hospitals, clinics, and long-term care facilities.
3. Evaluates control programs for chronic diseases: For diseases like HIV/AIDS or diabetes, prevalence helps assess ongoing management effectiveness.
4. Guides policy and planning: High prevalence of a chronic disease may lead to policy changes or public health campaigns.

Example:

High prevalence of hypertension in a community highlights the need for regular screening programs and lifestyle modification campaigns.

Relationship Between Incidence and Prevalence

There is a direct relationship between incidence and prevalence, expressed as:

$\text{Prevalence} = \text{Incidence} \times \text{Duration of the disease}$

This means that diseases with long duration (such as HIV/AIDS) tend to have high prevalence even if the incidence is low, while diseases of short duration (like influenza) have low prevalence even if the incidence is high.

4. Describe the measures used in controlling of diseases at the community level

Measures Used in Controlling Communicable Diseases at the Community Level

Controlling communicable diseases at the community level involves a combination of preventive, promotive, and control measures aimed at reducing the spread of infections, protecting the population, and improving overall health. These measures target both individuals and the environment, and require cooperation between health authorities, community leaders, and the public.

1. Health Education and Community Awareness

Health education is one of the most effective tools for preventing and controlling communicable diseases.

- It involves teaching people about personal hygiene, sanitation, safe food handling, and disease prevention methods.
- Awareness campaigns help people understand how diseases spread and what actions they can take to protect themselves and others.
- Examples include health talks, posters, radio messages, school programs, and community outreach.

Example: Educating communities about handwashing with soap reduces the transmission of diarrheal diseases and respiratory infections.

2. Immunization and Vaccination Programs

Vaccination is a key public health strategy to control communicable diseases.

- Immunization protects individuals and communities from vaccine-preventable diseases such as measles, polio, diphtheria, and hepatitis B.
- Mass immunization campaigns (e.g., national immunization days) help achieve herd immunity, which prevents the spread of infections even among unvaccinated individuals.

Example: The global polio eradication campaign has greatly reduced cases of poliomyelitis worldwide.

3. Environmental Sanitation

Maintaining a clean and healthy environment helps break the chain of infection.

- Proper waste disposal, safe water supply, and adequate sewage systems prevent the spread of diseases such as cholera, typhoid, and dysentery.
- Communities should prevent stagnant water accumulation to reduce mosquito breeding (vector control).
- Regular cleaning of public spaces, markets, and toilets should be encouraged.

Example: Providing safe drinking water and proper waste disposal facilities has significantly reduced cholera outbreaks in many areas.

4. Vector Control Measures

Controlling insects and animals that transmit diseases is essential in reducing infection rates.

- Mosquito control: Use of insecticide-treated nets (ITNs), indoor residual spraying, and elimination of breeding sites (stagnant water).
- Rodent control: Keeping homes clean, covering food properly, and sealing entry points to prevent rats from entering.
- Fly control: Proper disposal of waste and covering food to prevent contamination.

Example: Vector control programs have helped reduce malaria and dengue transmission in many tropical regions.

5. Surveillance and Early Detection of Cases

Disease surveillance involves continuous monitoring and reporting of communicable diseases in the community.

- Early detection helps in identifying outbreaks quickly and initiating prompt control measures.
- Health workers and community members play a vital role in reporting suspected cases to health authorities.
- Effective surveillance systems allow for timely response and epidemic preparedness.

Example: Immediate reporting of suspected cholera cases helps prevent large-scale outbreaks through rapid intervention.

6. Isolation, Quarantine, and Treatment

To prevent the spread of infection:

- Isolation is used for individuals who are already infected, keeping them separate from healthy persons until they are no longer infectious.
- Quarantine is used for individuals who have been exposed to a disease but are not yet showing symptoms, to monitor and prevent further transmission.
- Early and effective treatment of infected individuals helps reduce complications and stop the spread of disease.

Example: During the COVID-19 pandemic, isolation and quarantine were crucial in breaking chains of transmission.

7. Improvement of Nutrition and Living Conditions

Good nutrition strengthens the immune system and increases resistance to infections.

- Communities should be encouraged to consume a balanced diet with adequate proteins, vitamins, and minerals.
- Overcrowded housing should be reduced, as it promotes the spread of airborne diseases like tuberculosis and influenza.

Example: Malnourished children are more vulnerable to infections such as measles and diarrhea; improving nutrition reduces such risks.

8. Legislation and Health Policies

Governments play a key role in controlling communicable diseases through public health laws and regulations.

- Enforcing food safety laws, waste disposal regulations, and vaccination requirements ensures public safety.

- Quarantine and travel restrictions may be implemented during epidemics or pandemics.
- Policies supporting disease reporting and mandatory immunization strengthen control efforts.

Example: The Public Health Act in many countries empowers authorities to enforce sanitation and quarantine measures during outbreaks.

9. Community Participation and Intersectoral Collaboration

Community involvement is essential for sustainable disease control.

- Encouraging people to take part in clean-up campaigns, vector control activities, and health education programs promotes ownership and cooperation.
- Collaboration between sectors such as health, education, agriculture, and environment enhances the effectiveness of control measures.

Example: Involving schools and local leaders in vaccination drives improves community turnout and disease prevention.

10. Health Services Strengthening

Strong and accessible health services ensure effective disease control.

- Adequate staffing, equipment, medicines, and laboratories are needed for prompt diagnosis and treatment.
- Training health workers on infection prevention and control (IPC) helps reduce transmission in healthcare settings.

Example: Establishing community health centers improves early diagnosis and management of communicable diseases.

5. Write short notes on the following:

- Epidemiological triangle**
- Vehicle-borne transmission**
- Point prevalence and period prevalence**

1. Epidemiological Triangle:

The epidemiological triangle is a model used to explain how diseases occur and spread in a population. It shows the interaction between three essential components: agents, host, and environment.

Example: In malaria

- Agent: Plasmodium parasite
- Host: Human
- Environment: Presence of mosquitoes and stagnant water

2. Vehicle-Borne Transmission:

Vehicle-borne transmission is a type of indirect transmission of communicable diseases. It occurs when an infectious agent is carried by a non-living material or object (vehicle) to a new host.

Examples:

- Contaminated blood or syringes can transmit HIV or hepatitis B

3. Point Prevalence and Period Prevalence

a) Point Prevalence:

This is the proportion of people who have a particular disease at a specific point in time.

It gives a snapshot of the disease burden at that exact moment.

Example: The number of people suffering from influenza on June 1, 2025 in a city.

Formula:

Point prevalence = $\frac{\text{All existing cases on a specific date}}{\text{Total population on that date}}$

b) Period Prevalence:

This refers to the total number of cases (new and existing) that occur over a specific period of time (for example, a month or a year).

It captures both new and old cases within that time frame.

Example: The total number of people who had influenza at any time between January and June 2025 in a city.

Formula:

Period prevalence = $\frac{\text{All cases during a given period}}{\text{Average population during that period}}$